FEC FORM 2

5547

20160609020019

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Hon. Ann Leila Kirkpatri	ck	-		SECI	RETARY OF	THE SE	NATE
(b) Address (number and street) PO Box 34421		address ch	anged	2. Candida S6A2 (1	te's FEC Ide		Number 50
(c) City, State, and ZIP Code Phoenix, AZ 85067				3. Is This Statement	□ _(N) New	OR	Amended (A)
4. Party Affiliation DEM	5. Office Sought Senate		6. S	tate & District o	f Candidate		
DESIG	NATION OF	PRINCIP	AL CAMI	PAIGN CO	MMITTE	Ε	•
7. I hereby designate the following na	med political comm	ittee as my	Principal Ca	mpaign Commi	ttee for the	201 (year of ele	election(s).
NOTE: This designation should be file	ed with the appropr	iate office lis	sted in the in:	structions.			
(a) Name of Committee (in full)			•		·		
Windowskaich for Const							
(b) Address (number and street)	<u> </u>						
PO Box 34421							
(c) City, State, and ZIP Code							
Phoenix, AZ 85067							
I hereby authorize the following n behalf of my candidacy.	amed committee, w	hich is NO	Γ my principa	I campaign cor	nmittee, to re	eceive and	d expend funds on
NOTE: This designation should be file	ed with the principa	I campaign	committee.				
(a) Name of Committee (in full)							
Boots in Action							
(b) Address (number and street)	-						
2910 E Gary Way							
(c) City, State, and ZIP Code							
Phoenix, AZ 85042							
I certify that I have examine	ed this Statement a	nd to the be	st of my knov	vledge and beli	ef it is true,	correct and	d complete.
Signature of Gandidate	pal			Date	, - 8 -	16	
Note: Submission of false, erroneous, or In	complete Information m	nay subject the	person signing	this Statement to	penalties of 2 l	J.S.C 437g.	
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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Off the Sidelines Senate 2016

(b) Address (number and street) 918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Women on the Road 2016

(b) Address (number and street) 120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Take Back the Majority 2016

(b) Address (number and street)
918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

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201606090200195549

FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

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NOTE: This designation should be filed with the principal campaign committee	ee.
(a) Name of Committee (in full)	
Justice 2016	
(b) Address (number and street) 918 Pennsylvania Ave	·
(c) City, State, and ZIP Code	
Washington, DC 20003	

Faxed or Hand Delivered

201606090200195

PREPARER___

HART SENATE OFFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

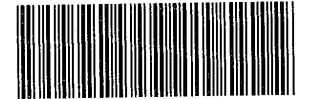
THE PRECEDING DOCUMENT WAS:

WASHINGTION, DC 20510-7116 PHONE(202) 224-0322

HAND DELIVERED 6-9-19 Date of Receipt
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SEN PATCH



SEN PATCH